

SEMINOLE COUNTY PLANNING & DEVELOPMENT DIVISION

1101 EAST FIRST STREET, ROOM 2028 SANFORD, FLORIDA 32771 TELEPHONE: (407) 665-7371

PLANDESK@SEMINOLECOUNTYFL.GOV

PROJ. #:	

NOISE ORDINANCE EXEMPTION

MUST SUBMIT COMPLETED APPLICATION, FEE AND OTHER REQUIRED DOCUMENTS NO LESS THAN <u>FOURTEEN</u> (14) DAYS PRIOR TO THE EVENT.

NOISE EXEMPTION PERMIT	\$75.00		
EVENT INFORMATION			
EVENT NAME:			
EVENT ADDRESS:			
EVENT PARCEL ID #:			
DATE(S) & TIME(S):			
ACREAGE OF PROPERTY:	ZONING:		
PROPERTY OWNER			
NAME:	COMPANY:		
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		
AUTHORIZED AGENT			
NAME:	COMPANY:		
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		
By my signature hereto, I do hereby certibest of my knowledge, and understand the or reversal of this application and / or rehave the lawful right and authority to file	nat deliberate misrepresentation of evocation of any approval based u	such information will be grounds for d	enial
SIGNATURE OF OWNER/AUTHORIZED AF (Proof of owner's authorization is required wi		DATE	

AT.	ATTACHMENT CHECKLIST			
	APPLICATION			
	APPLICATION FEE			
	DESCRIPTION OF EVENT (TYPE OF PERFORMANCES, RECORDING AND/OR SOUND AMPLIFICATION EQUIPMENT, SIGNS OR OTHER DEVICES FOR ATTRACTING ATTENTION, ETC.)			
	NOTICE OF ACTIVITY THAT MAY GENERATE NOISE FORM (COMPLETED)			
	SURVEY/SITE PLAN SHOWING THE LOCATION(S) OF ALL PERMANENT AND/OR TEMPORARY STRUCTURES, MUSIC, FIREWORKS OR OTHER NOISE SOURCE(S), AND LANDSCAPE OR OTHER BUFFER BETWEEN NOISE AND SURROUNDING RESIDENTIAL AREAS.			
	APPLICANT AUTHORIZATION FORM, IF APPLICABLE			
	FORMATIONAL: EVENTS THAT PROPOSE BARRICADING ANY STREET(S) WILL REQUIRE A PERMIT FROM THE PUBLIC DRKS DEPARTMENT. THEY CAN BE REACHED AT (407) 665-5678			

SEMINOLE COUNTY APPLICANT AUTHORIZATION FORM NOISE PERMIT

An authorized applicant is defined as:

- The property owner of record; or
- An agent of said property owner (power of attorney to represent and bind the property owner must be submitted with the application); or
- Contract purchaser (a copy of a fully executed sales contract must be submitted with the application containing a clause or clauses allowing an application to be filed).

I,	_, the owner of record for	the following described property	
(Legal Description or Tax/Parcel ID Number)			
hereby petition Seminole County Board of Coun	nty Commissioners to grant	a Noise Exemption Permit and	
affirms that	irms that is hereby designated to act as my author		
agent for the filing of the attached application ar	nd make binding statements	and commitments regarding the	
request. I certify that I have examined the attache	ed application and that all st	atements and diagrams submitted	
are true and accurate to the best of my knowledge	e. Further, I understand that	this application, attachments and	
fees become part of the Official Records of Semine	ole County, Florida and are	not returnable.	
DATE	Owner's Signature		
CTATE OF ELODIDA	Owner's Name		
STATE OF FLORIDA COUNTY OF			
SWORN TO AND SUBSCRIBED before me,	an officer duly authorized	I in the State of Florida to take	
acknowledgements, personally appeared	•		
me or who has produced a			
foregoing instrument and sworn an oath on this	day of	, 20	
	C		

Notice of Activity That May Generate Noise

has requested a permit for an activity on				
Name of individual/organization				
	between the hours of	and		
Date(s)	secween the nours or			
The activity will take place	at this location:	·		
	e activity may include amplified music, generate noise. Please sign below to ac			
NAME (PRINT)	ADDRESS	SIGNATURE		